Fill	in this information to identify your ca	se:							
Del	otor 1 Gerard F. Mo	Dowell			_				
	otor 2 Mary Theres	e McDowell							
Uni	ted States Bankruptcy Court for the:	MIDDLE DISTRICT O WILKES-BARRE DIVI			_				
	5:19-bk-03008-M	JC					ed filing ent shov	wing postpetition	chapter 13
0	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your Inco	me				, ,			12/15
spo	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O Describe Employment	spouse is not filing wit	h you, do not include	e inform	atior	about your spou	ise. If m	nore space is ne	eded,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or nor	n-filing spouse	
	If you have more than one job,		☐ Employed			■ Emp	oyed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed			□ Not €	. ,		
	Include part-time, seasonal, or	Occupation				Local I	<u>Market</u>	ing Consultar	nt
	self-employed work.	Employer's name				Global	Opera	ation Services	, LLC
	Occupation may include student or homemaker, if it applies.	Employer's address				2222 S Durhai		k Rd 27713-2655	
		How long employed th	nere?				B years	s and 2 month	าร
Par	Give Details About Mont	thly Income							
	mate monthly income as of the dates so you are separated.	te you file this form. If y	ou have nothing to rep	ort for an	y line	e, write \$0 in the sp	ace. Inc	lude your non-fili	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this forn		oine the information for	r all empl	oyers	s for that person on	the line	s below. If you ne	eed more
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	0.00	\$	4,312.53	-
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$	0.00	-
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	0.00	\$	4.312.53]

Official Form 106I Schedule I: Your Income page 1 Doc 53 Filed 03/24/22 Entered 03/24/22 11:55:20 Desc

				For	Debtor 1		otor 2 or ng spouse	
	Copy	/ line 4 here	4.	\$_	0.00	\$	4,312.53	
5.	List a	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ - \$	0.00	\$	682.93 0.00	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$_ \$_	0.00	\$	0.00	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_ \$_	0.00	\$	0.00	
	5g. 5h.	Other deductions. Specify: Unemployment Ins PA PA LKILU-Luz LS	5g. 5h.+	\$_ \$_ \$_	0.00 0.00 0.00	\$ \$	0.00 2.60 4.33	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	689.86	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	0.00	\$	3,622.67	
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
	O.L.	monthly net income.	8a.	\$_	0.00	\$	0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8b.	\$_	0.00	\$	0.00	
		settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	
	8e. 8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	8e.	\$_	1,763.00	\$	0.00	
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	336.79	
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,763.00	\$	336.79	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,763.00 + \$_	3,959	.46	,722.46
11.	Include other	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your defineds or relatives. ot include any amounts already included in lines 2-10 or amounts that are not availify:	ependen	. ,	,	Schedule	<i>J</i> . 11. + \$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ 5	,722.46
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?				monthly i	
	П	Yes. Explain:						

Fill	n this informa	ation to identify you	r case:					
Debt	or 1	Gerard F. Mcl	Dowell			_	eck if this is:	
Debt	or 2 use, if filing)	Mary Therese	McDov	vell			An amended filing A supplement show expenses as of the	ring postpetition chapter 13 following date:
		ruptcy Court for the:		E DISTRICT OF PENNSYL S-BARRE DIVISION	VANIA,		MM / DD / YYYY	
	e number <u>5</u> nown)	:19-bk-03008-M	JC					
Of	ficial Fo	orm 106J						
Sc	hedule	J: Your E	xpen	ises				12/15
Be a	as complete rmation. If n	and accurate as p	ossible. led, atta	If two married people are	filing together, botl orm. On the top of a	h are equa	ally responsible for s nal pages, write you	
Part 1.	1: Desc	ribe Your Househ	old					
١.	□ No. Go t							
		es Debtor 2 live in	a conara	ata housahold?				
	_		a separe	nte mousemoia :				
			file Offici	al Form 106J-2,Expenses	for Separate Househ	oldof Debt	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	e the						□ No
	dependents	names.						Yes
								□ No
								☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
3. Part	expenses of yourself an	penses include of people other than od your dependent nate Your Ongoing	in ts? □	No Yes y Expenses				
expe	mate your e	xpenses as of you a date after the ba	ır bankrı	ptcy filing date unless your is filed. If this is a supple				
valu		ssistance and have		povernment assistance if yed it on Schedule I: Your I			Your exp	enses
4.		or home ownershind any rent for the g		ses for your residence. In lot.	clude first mortgage	4.	\$	1,385.21
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's, o	or renter's	sinsurance		4b.	·	0.00
	4c. Home	e maintenance, rep	air, and ι	ıpkeep expenses		4c.	·	250.00
_		eowner's associatio				4d.	·	0.00
5.	Additional	mortgage paymen	its for yo	ur residence, such as hom	ne equity loans	5.	\$	0.00

Official Form 106J Schedule J: Your Expenses page 1

McDowell, Gerard F. & McDowell, Mary Therese	Case number (if known	5:19-bk-03008-MJ
Itilities:		
a. Electricity, heat, natural gas	6a. \$	330.00
b. Water, sewer, garbage collection	6b. \$	130.55
c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	190.00
d. Other. Specify: Garbage	6d. \$	23.00
Verizon Cellular		151.68
ood and housekeeping supplies	—	700.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	50.00
ersonal care products and services	10. \$	
ledical and dental expenses	11. \$	90.00
·	П. Ф	120.00
ransportation. Include gas, maintenance, bus or train fare. To not include car payments.	12. \$	500.00
intertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
Charitable contributions and religious donations	14. \$	40.01
narrance.	ιτ. ψ	40.01
o not include insurance deducted from your pay or included in lines 4 or 20.		
5a. Life insurance	15a. \$	220.39
5b. Health insurance	15b. \$	1,061.62
5c. Vehicle insurance	15c. \$	176.27
5d. Other insurance. Specify: Sewer Line Insurance	15d. \$	18.00
Sewer Line Insurance Sewer Line Insurance Saxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	15α. ψ	10.00
specify: Truckville Local Income Taxes	16. \$	85.00
nstallment or lease payments:	o.	65.00
7a. Car payments for Vehicle 1	17a. \$	0.00
7b. Car payments for Vehicle 2	17b. \$	0.00
	17c. \$	
7c. Other. Specify: Home Equity Loan 7d. Other. Specify:	17d. \$	234.15
	1/u. \$	0.00
our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	0.00
Other real property expenses not included in lines 4 or 5 of this form or on Sched		
Oa. Mortgages on other property	20a. \$	0.00
0b. Real estate taxes	20b. \$	0.00
Oc. Property, homeowner's, or renter's insurance	20c. \$	0.00
Od. Maintenance, repair, and upkeep expenses	20d. \$	0.00
Oe. Homeowner's association or condominium dues	20e. \$	0.00
	20e. \$ 21. +\$	
Other: Specify: Cat Food	∠1. † \$	150.00
Calculate your monthly expenses		
2a. Add lines 4 through 21.	\$	5,905.88
2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$,
2c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,905.88
, , ,		3,303.00
Calculate your monthly net income.		
3a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,722.46
3b. Copy your monthly expenses from line 22c above.	23b\$	5,905.88
		,
3c. Subtract your monthly expenses from your monthly income.		400.40
The result is your monthly net income.	23c. [\$	-183.42
Or you expect an increase or decrease in your expenses within the year after you or example, do you expect to finish paying for your car loan within the year or do you expect your nodification to the terms of your mortgage?		crease or decrease because of
No.		